

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Vogel for Congress

ADDRESS (number and street)

58 Bradley Dr.

Check if different
than previously
reported. (ACC)

Hull

GA

30646

2. FEC IDENTIFICATION NUMBER ▼

C

C00552976

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

GA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dr. David Donald Vogel

Signature of Treasurer

Dr. David Donald Vogel

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

07

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Vogel for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	11720.60	12315.44
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	11720.60	12315.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7074.49	7664.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	72.71	72.71
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7001.78	7591.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4723.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Vogel for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

5274.00

5574.00

(iii) TOTAL of contributions from individuals ▶

5274.00

5574.00

(b) Political Party Committees.....

885.00

885.00

(c) Other Political Committees (such as PACs).....

40.00

40.00

(d) The Candidate.....

5521.60

5816.44

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

11720.60

12315.44

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

72.71

72.71

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

11793.31

12388.15

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7074.49	7664.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7074.49	7664.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11793.31
25. SUBTOTAL (add Line 23 and Line 24).....	11798.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7074.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4723.98

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 12

☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Vogel for Congress

A. Full Name (Last, First, Middle Initial)
Banks County Democratic Committee

Mailing Address 152 Cash Rd.

City State Zip Code
 Baldwin GA 30511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

60.00

Date of Receipt

M M / D D / Y Y Y Y
 03 29 2014

Transaction ID : SA11B.4394

Amount of Each Receipt this Period

60.00

B. Full Name (Last, First, Middle Initial)
Gilmer County Democratic Party

Mailing Address 111 Ballard Ln.

City State Zip Code
 Ellijay GA 30536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 20 2014

Transaction ID : SA11B.4182

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Gilmer County Democratic Party

Mailing Address 111 Ballard Ln.

City State Zip Code
 Ellijay GA 30536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

290.00

Date of Receipt

M M / D D / Y Y Y Y
 02 20 2014

Transaction ID : SA11B.4389

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Vogel for Congress

A. Full Name (Last, First, Middle Initial)
Jackson County Democratic Committee

Mailing Address P.O. Box 471

City State Zip Code
 Jefferson GA 30549

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y
 03 20 2014

Transaction ID : SA11B.4310

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
Union County Democratic Committee

Mailing Address P.O. Box 2654

City State Zip Code
 Blairsville GA 30512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y
 03 08 2014

Transaction ID : SA11B.4312

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
Union County Democratic Committee

Mailing Address P.O. Box 2654

City State Zip Code
 Blairsville GA 30512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

230.00

Date of Receipt

M M / D D / Y Y Y Y
 03 08 2014

Transaction ID : SA11B.4393

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

430.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Vogel for Congress

A. Full Name (Last, First, Middle Initial) Fannin County Event Unitemized		Date of Receipt M M / D D / Y Y Y Y 03 / 04 / 2014	
Mailing Address		Transaction ID : SA11B.4390	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 105.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 105.00		
B. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....		105.00	
TOTAL This Period (last page this line number only).....		885.00	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 12

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Vogel for Congress

Full Name (Last, First, Middle Initial)

Democratic Women of Forsyth County

Mailing Address 4045 Eyrie Farms Ln

City

Cumming

State

GA

Zip Code

30041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

40.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2014

Transaction ID : SA11C.4398

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

40.00

40.00

FOR LINE NUMBER:		PAGE 9 OF 12	
(check only one)			
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

NAME OF COMMITTEE (In Full)
Vogel for Congress

01 / 08 / 2014

C H4GA09057

Election Cycle-to-Date

Category	Value
Election Cycle-to-Date	596.44

301.60

MM / DD / YYYY

C H4GA09057

Election Cycle-to-Date

Category	Value
Election Cycle-to-Date	5816.44

5220.00

C

Election Cycle-to-Date

5521.60

5521.60

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SA11D
Transaction ID : SA11D.4308

Advance to be repaid

Form/Schedule: SA11D
Transaction ID: SA11D.4309

Advance to be repaid

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Vogel for Congress

Full Name (Last, First, Middle Initial)

A. Democratic Party of Georgia

Mailing Address P.O. Box 20442

City	State	Zip Code
Atlanta	GA	30325

Purpose of Disbursement
Qualitying fee

001

Category/
Type

Candidate Name

Vogel for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

5220.00

Transaction ID : SB17.4362

B. Gainesville Park District

Mailing Address 300 Henry Ward Way

City	State	Zip Code
Gainesville	GA	30501

Purpose of Disbursement
Civic Center room rental

007

Category/
Type

Candidate Name

Vogel for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: GA

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

301.60

Transaction ID : SB17.4361

c. Dr. David Donald Vogel

Mailing Address 58 Bradley Dr.

City	State	Zip Code
Hull	GA	30646

Purpose of Disbursement
Partial repayment of advance

010

Category/
Type

Candidate Name

Vogel for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: GA

District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4350

SUBTOTAL of Disbursements This Page (optional).....

6521.60

TOTAL This Period (last page this line number only).....

6521.60

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB17

Transaction ID : SB17.4350

Partial repayment of advance of 3/05/14. \$4220 remains outstanding

Form/Schedule:

Transaction ID: